Procedure C	ode Description	Rate
H0035	MENTAL HEALTH PARTIAL HOSPITALIZATION, TREATMENT, LESS THAN 24 HOURS	\$35.71
H0049	ALCOHOL AND DRUG SCREENING	\$0.00
H0050	ALCOHOL AND DRUG SCREENING, BRIEF INTERVENTION, PER 15 MINS	\$0.00
H2001	REHABILITATION PROGRAM, PER 1/2 DAY	\$223.50
H2011	CRISIS INTERVENTION SERVICE, PER 15 MINUTES	\$22.50
H5010	THERAPY, INDIVIDUAL, BY SOCIAL WORKER, PSY. NURSE, ETC. PER HR.	\$26.64
	PSYCHOTHERAPY, GROUP (MAXIMUM 8 PERSONS PER GROUP, 45-50 MINUTES, PER PERSON, PER	
H5020	SESSION)	\$6.11
H5170	OTHER SPECIAL EDUCATION OR VOCATIONAL SERVICES	\$0.00